

The North Carolina

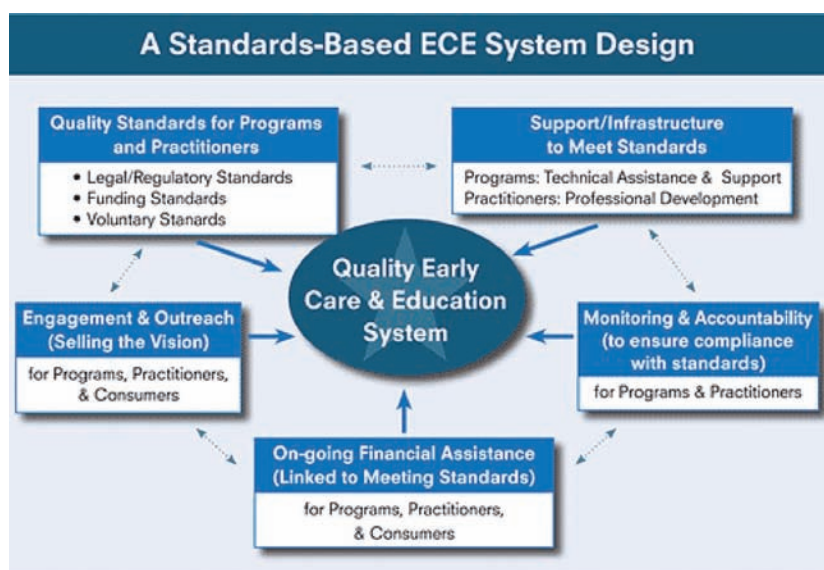
Quality Rating and Improvement System (QRIS)

Advisory Committee Executive Summary
September, 2012



Recognizing that young children's wellbeing and success are an integral part of any prosperous community, in September 1999 North Carolina implemented the star rated license system to promote optimal learning environments for all children in early education and school-age programs.

Ten years later, in September 2009, the Division of Child Development and Early Education (DCDEE) convened a group of key stakeholders from across the state who agreed that North Carolina was ready to think toward the future for an even stronger Quality Rating and Improvement System (QRIS). Nationally, a QRIS is defined as a framework for the early care and education system. As stated by the QRIS National Learning Network: "A QRIS is not just about ratings or a stand-alone program to improve quality. It is a unique tool for system reform that has the potential to reach programs that serve a wide range of children." As the figure below shows, an effective QRIS has many different elements, each of which are important for a quality early care and education systems.



(Source: Alliance for Child Care Financing, 2007. Quality Rating and Improvement Systems: A Powerful Policy for Improving and Unifying Early Care and Education.)



The current QRIS in North Carolina includes the following five elements:

1. Quality Standards for Programs and Practitioners
2. Support/Infrastructure to Meet Standards
3. Monitoring & Accountability
4. On-Going Financial Assistance
5. Engagement & Outreach

Because each of these elements is important, the QRIS Advisory Committee realized that its work must address each of the elements. From September 2009 through June 2012, the QRIS Advisory Committee met to review the current early education system, provide a vision for the future of the QRIS, and make recommendations for short and long-term changes intended to lead the State toward that vision. This vision not only included improvements to the star rated license system, but also to the broader system of early care and education. The group was charged to develop recommendations for systems-level improvements, efforts to further support quality early care and education settings, as well as informed decision-making and increased access to care for families. The existing system reflects an established “floor” (lowest level on the rated license system) and “ceiling” (highest level on the rated license system) for quality in early care and education. Given the significant progress that the State has made since the rated license system was initiated, it was time to evaluate the system to determine what improvements could be made over the next decade. This re-examination of the QRIS was also considered to be imperative given the expanded understanding of research that further defines child care quality indicators, as well as research showing that certain age groups and vulnerable populations are especially affected in positive ways when afforded the access to quality early care & education settings.

Throughout the process, the group was careful to examine proposed recommendations with a particular emphasis on specific areas of importance. The areas that the group considered to be critical included cultural competence, inclusion of children with disabilities, and alignment with the NC Early Learning & Development Standards (Foundations). Ultimately, the recommendations from the committee will be used to promote policy revisions and improvements within the DCDEE Rated License system, and the early care and education system as a whole.

The charge to the group was to develop recommendations that could be the basis for improvements to be implemented over the course of the next decade. The vision and the recommendations are not intended to be changes that will happen easily or quickly.

The group has given careful consideration to many factors related to the current status of North Carolina's QRIS and overall early care and education system when making the recommendations. Additional efforts are needed to ensure the availability of personnel, programmatic and fiscal resources in order to implement the recommendations. Therefore, the committee offers the following recommendations related to the overall structure of the QRIS, and for improvements within specific areas of the QRIS and the early care and education system, with the understanding that many of these improvements will take years to implement.

This Executive Summary provides a summary of a conceptual framework for revisions that could be made in the overall structure of the QRIS, followed by recommendations related to several specific components of the QRIS that were addressed by Work Groups, and concludes with additional recommendations that fall outside the purview of the work groups that examined specific components of the QRIS. The full report provides additional background information and explanation of these recommendations, as well as additional recommendations offered by the QRIS Advisory Committee.



Conceptual Framework for the Levels within a Revised QRIS

In order to improve the QRIS, the Advisory Committee believes that some changes are needed in how programs are rated. Currently, the vast majority of our programs have obtained at least three stars within our five star system. This means that the one- and two-star requirements are exceeded by most programs. There is, however, variation in quality between programs at the same star level. In addition, we believe that many programs are exceeding the highest level within the current system, but there is no mechanism within the system to document and recognize programs that exceed the current requirements for five stars. Finally, we feel that programs should be recognized for special features/unique strengths and there is no current method for highlighting the unique features of programs. Therefore we are recommending a conceptual framework for future changes to the structure of the system. These recommendations are meant as a guide for future decisions rather than a structure that would be implemented exactly as described because many factors need to be considered when changing the overall structure of the QRIS.

Therefore, the purposes for the proposed framework for the QRIS structure are to:

1. Acknowledge that the vast majority of programs in North Carolina already exceed the current I-Star minimum requirements and affirm the principle that North Carolina should set the minimum requirements at a level that assures all children are protected from physical and emotional harm and have the foundation for success in school and in life.
2. Affirm the tremendous progress that programs and partners have made in meeting the requirements at the upper levels within the current system and revise the upper levels accordingly. Raising the requirements for the highest levels within the system will allow North Carolina to better differentiate between programs at the higher level of quality.
3. Reduce the variation in quality across programs at the same star level (i.e., to have a system where programs at the same rating level have more commonalities in terms of the requirements they have met). In order to address this third purpose, the intent is to continue to offer programs choices in how they meet the QRIS requirements for the levels, but to also set a limited number of requirements that all programs at a specified level must meet;
4. Provide a system of points leading to a “Program of Distinction” designation in different areas of specialization; and
5. Establish a clear pathway through levels of increasingly higher quality.

The following section describes the basic features of the recommended conceptual framework to guide decisions related to a revised QRIS structure, and outlines general principles and specific suggestions as parameters for the revisions in the system.

Nature of the System

We recommend that North Carolina's revised QRIS be a hybrid system that includes some requirements that programs must meet at each level (i.e., "blocks") and a mechanism for providers to choose additional requirements to meet (i.e., "points") at each level. Programs must meet the minimum licensing standards for health and safety to enter the system and achieve the first level. Designation at a higher level would be dependent on meeting requirements for Blocks and Points.

Components of the System

The Conceptual Framework for QRIS figure on page 9 visually illustrates the Committee's recommended framework for the structure of a revised system. The recommended components of the framework include:

1. Core Requirements

Core Requirements are those that must be met at the first level and maintained at each of the higher levels. These requirements are deemed to be essential and are minimum requirements in the areas of Policy and in Space/Safety/Compliance.

2. Blocks Within the System

"Blocks" are set requirements that must be met to achieve some levels within this framework. The Blocks would be in three categories: 1) Program and Environment; 2) Ratios and Group Size; and 3) Education and Professional Development. The Committee recommends the following regarding the Blocks:

- a. The system should include Blocks that articulate requirements that must be met to reach the first, third and fifth level. Levels two and four would be transition levels as programs work to meet the requirements for the third and fifth levels and would, therefore, not be levels with Blocks.

- b. There should be a limited number of requirements addressed in each Block category. The Block Requirements should address evidence-based features of care.
- c. The number of requirements within the Blocks does not have to be the same at each level.

3. **Points within the System**

“Points” are credits that programs earn by meeting criteria or requirements in areas that they choose. Points should make up a substantial portion of what is required at each level and programs should have opportunities to choose from a variety of ways to earn points, including points for program features/standards that are not addressed within the Blocks (i.e., Points for Specialization). There are two types of points:

- a. **Block Points:** Providers at the first, third and fifth level could choose to earn points by meeting some or all of the requirements of the next Block above their current level. They would receive Block Points based on a specified system that assigns Block Points in accordance with the degree to which the next level’s Block Requirements are met.
- b. **Specialization Points:** Specialization Points are credits that programs would earn by meeting specified requirements associated with an area of specialization that they choose. Examples of the areas in which programs might earn Points for Specialization could include: Outdoor Learning, Inclusion, Cultural Responsiveness, CSEFEL, Infant Toddler, School Age, and Science, Technology, Engineering, and Mathematics (STEM). Specialization Points should be awarded based upon a continuum, with fewer points for meeting the first requirements within an area of specialization (i.e., requirements that are not as difficult to achieve) and the maximum number of points for full implementation/meeting the maximum requirements in the area. Programs that achieve the fourth or fifth level within the QRIS structure and a required number of Specialization Points could receive a “Program of Distinction” designation.

DCDEE should establish a process for nominating and evaluating what specific areas should be included as areas of Specialization. Once the Specialization areas are established, a process should be implemented to determine the specific requirements within each area, devise a strategy for evaluating/documenting that programs meet the requirements within each area, and determine who and how the Specialization

requirements will be documented and evaluated in order to assign points (including a plan to assure that whoever is evaluating these areas has sufficient knowledge and expertise within the Specialization area to appropriately evaluate programs).

Progress within the Recommended Framework

Programs would progress from one level to the next by meeting requirements for Blocks and Points. The following describes the requirements that would be operative at each level within the recommended framework:

First Level: Programs must meet all Core Requirements and the Block requirements for the first level.

Second Level: Programs must meet the Core Requirements and the Blocks for the first level and must achieve a minimum number of Points from two of the following four categories: Program & Environment, Ratios/Group Sizes, Education/Professional Development or Specialization Points. Points earned for Program & Environment, Ratios/Group Sizes, and Education/Professional Development help the provider to progress toward the third level requirements.

Third Level: Programs must meet the Core requirements and Block requirements for the third level plus a minimum number of Specialization Points.

Fourth Level: Programs must meet the Core Requirements and the Blocks and Specialization Points for the third level and must achieve a minimum number of Points from two of the following four categories: Program & Environment, Ratios/Group Sizes, Education/Professional Development or Specialization Points. Points earned for Program & Environment, Ratios/Group Sizes, and Education/Professional Development help the provider to progress toward the fifth level requirements.

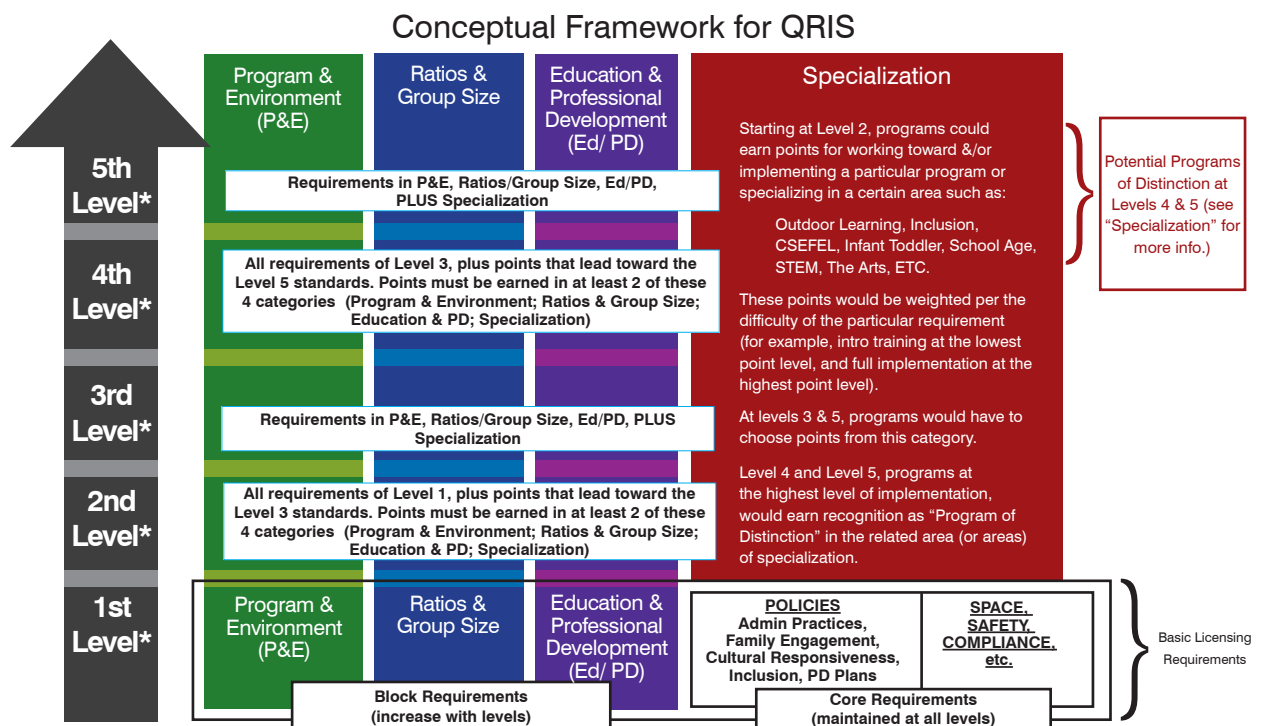
Fifth Level: Programs must meet the Core Requirements and Block Requirements for the first level plus a minimum number of Specialization Points.



Determining Specific Requirements and Points within the Conceptual Framework

The Committee does not feel that we are in a position to make definitive recommendations for what should be required at each level because the full set of recommendations address numerous quality improvements. The group also recommends that accreditation be included in the QRIS as an option for fulfilling some requirements at the higher levels. However, the group did not make a firm recommendation for how accreditation should be addressed because the requirements for each level within the system should be set first, and then the requirements for various accreditation systems should be compared to the requirements for the levels to decide how accreditation best fits within the system.

We, therefore, strongly recommend that a validation study be carried out to systematically examine the impact of the recommended changes on providers and other aspects of the early care and education system prior to defining a revised system for rating programs. Data from the validation study should be used to decide what program features to include within Blocks, what features to include as points, how the Points for Specialization should be allocated, how much weight to put on different requirements, and where to set the “level” of requirements (what the specific requirements should be included in each block at each level).



* ERS or other quality measure required at this level. Also, it is expected that program accreditation will be added to the model during the pilot phase, most likely at levels 3-5.

Calibration of the Stars with the New Structure

The Committee recognizes that implementation of a revised QRIS will necessitate decisions regarding the transition from the current system for assigning stars to the new system for differentiating levels. In North Carolina, the quality of programs across the state has improved significantly. As a result, the vast majority of programs are at the three-, four-, and five-star levels. This improvement has resulted from a collaborative effort by early care and education providers, DCDEE, technical assistance providers, and system partners, leading to better outcomes for children. The Committee wishes to recognize and reward provider efforts to meet even higher, evidence-based standards, thus promoting optimal development for all children. Furthermore, the committee realizes that providers are deeply invested in and significantly affected by their program's star level. Therefore the Committee recognizes that the transition from the old system to the new system and corresponding changes to the star levels will be complex, with many different issues to be considered.

The Committee spent considerable time discussing recommendations for how the current star system could be transitioned into a QRIS with a new structure with new requirements. From the discussions, a series of principles to guide decisions related to the transition were developed, recommendations for steps that should be taken before decisions are made regarding the transition to the new system were provided, and ideas for how the old system might be transitioned to the new system were offered. The text below summarizes the guidance the committee offers regarding the implementation of the new QRIS structure.



Guiding Principles for Transition to New System

- The transition from the current star system to a new system should not result in loss of financial support/subsidies for programs that maintain the same quality of services.
- The transition to a new system should be guided by implementation science and take place over a sufficient period of time to allow for adequate support for programs to understand the new system, and adequate time and support (both technical assistance and increases in subsidy rates) for programs to implement improvements that might be needed in order to earn the desired level under the new system.
- Decisions regarding how to transition to new requirements for star levels should be made based on data collected on how programs meet the current requirements and with input from providers and other stakeholders.

Steps to Inform Decisions about Implementation

- 1) The requirements within the current Rated License system should be “mapped” onto the recommended new structure to identify how the current requirements fit within the new structure and potential consistencies and inconsistencies. .
- 2) Data that is currently available and data collected during the impact/validation study should be used to project how programs would be distributed across the levels within the recommended new structure, and to determine the number of programs that would experience a change in their level if the recommended structure and requirements are implemented.
- 3) Focus groups and other strategies should be used to collect input on how the new system should be implemented and possible implications that the transition to a new system would have for stakeholders. Input should be collected from teachers, administrators, family child care providers, parents and policy makers.
- 4) A marketing/communication plan should be developed to ensure that information on the new system is shared with providers and parents.

The Committee also discussed multiple options that DCDEE could consider when transitioning to a new TQRIS. One option included the same number of levels in the current system; another option included a tiered model with additional levels. Other options may be possible. To make this decision, DCDEE must take into account the current policy climate, stakeholder input, the results of the validation/impact study, and advice from experts in marketing and communication strategies. Following the guiding principles and the steps recommended above will help to ensure a smooth transition.

Workgroup Recommendation Priorities

In addition to the recommendations for the overall structure of the QRIS, the Advisory Committee provided recommendations from six different workgroups. These workgroups included the following:

- Education and Professional Development
- Finance
- Infant/Toddler
- Program Assessments
- Programmatic Standards
- Systems-Level Evaluation

Each workgroup identified priority areas in addition to a comprehensive set of recommendations. The priority areas identified by each workgroup are described below. The full set of recommendations is included in the full report.



Education and Professional Development Workgroup

The Education and Professional Development Workgroup identified the following five high priority recommendations:

1. Orientation of the workforce

- a. Develop and require a standardized 10-hour orientation for new teaching staff prior to working with children that covers basic subject recommended by the Professional Development Work Group with differentiated content for Birth-5 and for School-Age. Basic School Age Care (BSAC) training, or its equivalent, should count toward school-age orientation and should be updated regularly.
- b. Increase orientation hours required in the first three months for both new and experienced teaching staff hired into a facility.
- c. Require family child care pre-licensing workshop for all family child care home providers prior to becoming licensed.
- d. Develop and require a standardized orientation, with an online option, for new-to-field / role / site administrators that awards .5 CEUs/5 contact hours, to be completed prior to assuming the role. All directors must verify that they have had the training or participated in the course. The course should be offered on a regular basis, updated annually, and address topics designated by the Professional Development Work Group. In addition, require all new-to-field / role / state administrators take pre-licensing workshops within four months of hire.

2. Increased compensation for the workforce

Prioritize focus on increasing compensation through evidence-informed strategies to raise compensation for providers. Provide sufficient funding for statewide salary supplements that reward education and retention regardless of place of employment or geographic location.

3. State professional development planning team

Create a cross-sector statewide professional development planning team to develop and implement a comprehensive system of preparation, ongoing development and support for all early childhood and school age education professionals working with and on behalf of children.

4. Improved higher education capacity, access & quality

- a. Require public Institutions of Higher Education (IHE) adopt system-wide articulation agreements from Associate of Applied Science in Early Childhood Education (AAS/ECE) degree and Associate of Applied Science in School-age (AAS/SA) degree into university degree programs for all community colleges and universities.
- b. Develop a master's level degree in early childhood and school-age leadership and management within the state IHE system.
- c. Increase funding for and provide information about financial resources for students seeking higher education to earn certificates and degrees for all positions in the field of early childhood and school-age care. This includes teachers, directors, family child care and school-age providers, plus those who support them (faculty and trainers, TAs, coaches and mentors, licensing consultants, etc.).
- d. Request the NC Community College System provide an annual report on utilization, credential and degree completion, and income and expenditures related to early childhood and school age credential and degree programs.
- e. Request the NC Community College System to require and support the Early Childhood Associate Degree Accreditation (ECADA) of all Early Childhood Education community college programs.
- f. Encourage ECADA to establish manageable caseloads at community colleges for advising staff, tied to the number of courses taught per semester as well as other factors. Ensure that appropriate individuals are serving as advisors for early childhood programs.
- g. Encourage and incentivize community college Early Childhood program faculty to adopt and utilize distance learning standards and find ways to implement them to ensure quality online courses.
- h. Encourage all two and four year early childhood education degree programs to provide students with multiple opportunities for guided and observed practicum and/or student teaching experiences throughout the degree program.

5. Supported and standardized technical assistance system

Provide options statewide for high quality technical assistance, which includes mentoring, coaching, and training, within an integrated system. Study, adopt and implement standards for all professional development specialists (Technical Assistance providers, consultants, mentors, coaches, trainers, etc.). Standards will be used to guide the preparation, content, delivery of service and assessment of service.

Finance Workgroup

To address the diverse needs of our state and its families, we are committed to a high quality early care and education system inclusive of public and private, nonprofit and for profit, programs/settings. All children deserve high quality services no matter what type of early care and education service they receive or the setting in which the services are provided. All early care and education settings provide both care and education, and are essential to promote the learning and wellbeing of young children. The short and long term economic impact of high quality early care and learning programs (particularly for children with risk factors) has been well documented, as has the differential cost of quality. As North Carolina considers improvements to its early care and education system, it must be recognized that increased public and private sector investment is necessary to accomplish systemic improvements that will yield even greater benefits for the children and families participating in the system, as well as long-term economic benefits for everyone.

Unfortunately the early care and education system currently is significantly under-funded and not in a position to live up to the potential benefits that quality early care and education services offer. Substantial additional investments are necessary in order to maintain North Carolina's current system and level of quality, and even more resources will be necessary to implement the recommendations for quality improvements included in this report. Without additional resources, North Carolina cannot maintain the progress we have made over the past decade or the current level of quality of our early care and education programs. Furthermore, additional quality improvement efforts such as those included in this report will not be possible without substantial investments in the early care and education system.

In order to strengthen and improve the early care and education system, substantial investments are needed to fund both services for children and to fund specific quality improvement efforts. Investments in direct services, through programs such as the child care subsidy program and the NC Pre-K program, enable parents to work (creating substantial economic benefits) and also provide the on-going funds needed for early care and education programs to operate. These investments in the system are key to stable funding for programs and the overall strength of the QRIS, and ultimately benefit all children in early care and education programs (including children who do not receive subsidy or support for their services). Therefore investments in direct services are key to the overall strength of the early care and education system. They are, however, necessary but perhaps not sufficient to promote the quality improvements that are needed for our state to continue to make progress toward high quality programs and a strong QRIS.

Based on the considerations described above, the QRIS Advisory Committee offers recommendations for investments in both direct services and targeted quality improvements, as well as a recommendation regarding the need for a long-term financing strategy for the state.

Recommendations

In order to maintain and improve the quality of programs, strengthen the QRIS, and provide greater access to early care and education for children, the QRIS Advisory Committee recommends the following:

- I. A systems-level Task Force should be convened to evaluate the current system for financing early care and education in North Carolina and develop recommendations for improved financing strategies. We recommend that the Early Childhood Advisory Council (ECAC), in conjunction with appropriate partners, convene this Task Force.

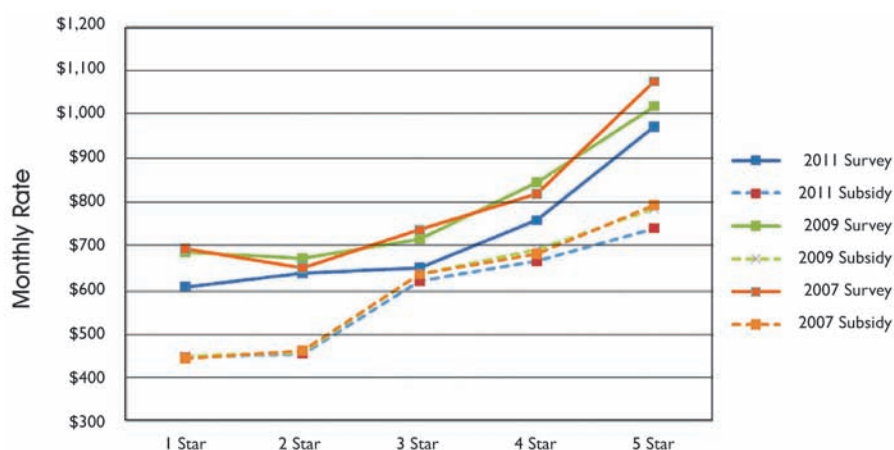
Rationale: The QRIS and early care and education programs cannot be expanded and/or improved without significant investment of additional resources into the system. Because additional resources are needed across all sectors of early care and education services, a systems-level Task Force is needed to examine all funding/revenue sources and expenditures across the systems. As the coordinating body for early care and education systems in North Carolina,

the ECAC is the appropriate group to convene such a Task Force. Furthermore, substantial public support will be needed for significant increases in early care and education investments, and the ECAC is currently engaged in a campaign to increase public will for early care and education. Therefore the ECAC appears to be well suited to convene a systems-level Task Force to address financing. The ECAC should, however, engage appropriate partners to ensure that the need for funding for school-age programs is addressed.

2. A Finance Committee consisting of a small group of key stakeholders be convened to provide continued advice to DCDEE regarding revenue generation, fee collection strategies, and distribution of available funds.
3. The Child Care Subsidy Reimbursement Rates should be incrementally increased over the next five years to reach the 75th percentile of the most recent market rate. The plan to incrementally raise the Subsidy Reimbursement Rates to the 75th percentile of the market rate should begin by raising the reimbursement rates for infants and toddlers in four and five star programs, followed by increased rates for all children in four and five star programs. The charts below show the differences that exist between the actual market rate that is identified through the Subsidy Market Rate Survey, and the subsidy reimbursement rate that is paid to child care providers based on the age of the child. The data indicate that providers who serve children on subsidy receive reimbursements that are far less than the funding they receive if serving children who were paying privately for the care. Please note that while the Finance Committee recommends that reimbursement rates should reflect the 75th percentile of the most recent market rate, the chart below compares the actual market rate as identified by the survey, to the reimbursement rates paid to child care providers:

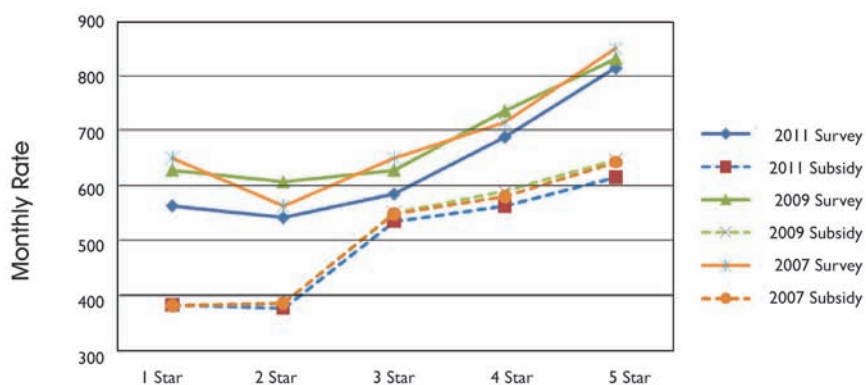
Infants and Toddlers – Actual Market Rates Reported on the Provider Survey vs. Subsidy Reimbursement Rates

2007-2011: Centers



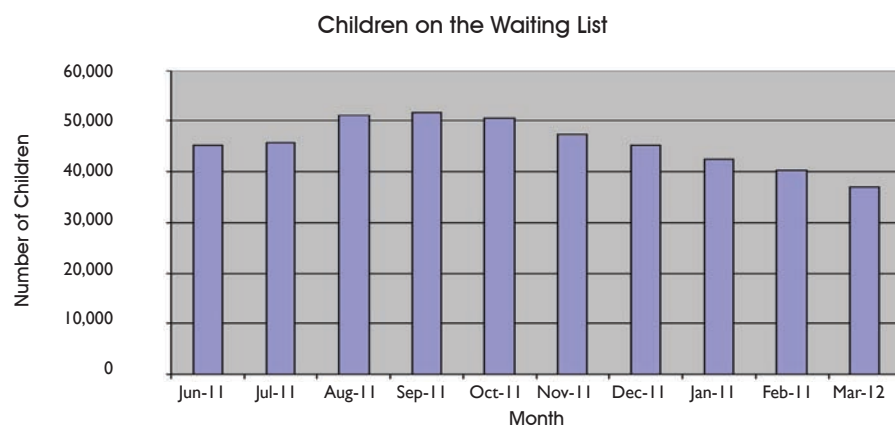
Three-to-Five-Year Olds – Actual Market Rates Reported on the Provider Survey vs. Subsidy Reimbursement Rates

2007-2011: Centers



4. Additional Child Care Subsidy and NC Pre-K funds should be provided to reduce waiting lists for quality services, and all such funds allocated in any given year should be spent on services for children during that year.

In addition, DCDEE should examine child care subsidy waiting list policies and procedures to ensure equity of distribution of available resources, and consistency of implementation of these policies and procedures, across North Carolina.



5. NC Pre-K reimbursement rates should be increased to reflect the true cost of the standard of early education provided and cover services in all regions of the state.
6. In addition to increased investments in both Child Care Subsidy and NC Pre-K systems, further investments are needed to maintain and promote quality improvements to strengthen infrastructure and service delivery within the early care and education system.
7. Funding to pay for providers to participate in the QRIS should continue to be provided through the Division of Child Development and Early Education. The costs for completing program assessments and all other steps in the QRIS Rated License Process should be funded by the Division.
8. Within quality improvement investments, significant attention should be afforded to increasing compensation for the child care workforce. Sufficient funding should be provided for statewide salary supplements that reward education and retention regardless of place of employment or geographic location. Parameters should be developed to ensure that a portion of any new or expanded quality improvement funds are allocated to support improved compensation for the work force.

Infant/Toddler Workgroup

The Infant-Toddler Workgroup completed its recommendations in June 2010, well before the other Work Groups. The goal was that this group's recommendations should be completed first, to inform the decisions of the other groups and ensure that other workgroups considered best practices for infants and toddlers as they developed their own recommendations. The following major themes are found in multiple recommendations from the Infant-Toddler Workgroup:

1. Standards for high quality infant and toddler care should be anchored in a relationship-based approach that supports all domains of development, especially emotional and social development. The six program policies of the Program for Infant Toddler Care (PITC), as well as Infant-Toddler Foundations (and soon the infant-toddler component of the revised Foundations), are consistent with this approach. We recommend that standards for curriculum, child assessment, program assessment, and professional development for infant-toddler caregivers be aligned with these resources to support a relationship-based approach in all infant and toddler programs.
2. We recommend that standards for ratios and group sizes in programs serving infants and toddlers be improved to ensure high quality, relationship-based care and education. Specifically, we recommend that DCDEE develop benchmarks and take steps toward meeting the PITC definition of appropriate ratios and group sizes. While we recognize that it would be difficult to implement these ratios immediately, it is still important to strive for ratios and group sizes that support optimal relationships and child outcomes, as shown below.

	# Children	# Caregivers
Infants	6	2
Young Toddlers	9	3
Older Toddlers	12	3

The ratios listed above apply to infants and toddlers in similar-age groupings. Mixed-age groupings, when implemented properly, can be very beneficial to children. Thus, we recommend that new statutes and rules be implemented to define and support appropriate mixed-age groupings for infants and toddlers.

3. We recommend that DCDEE endeavor to structure the revised QRIS, as well as the early care and education system, to fully support high quality infant and toddler care to the same extent that high quality care for preschool-age children is supported. Examples of recommended steps leading toward this goal include:
 - a. Require all lead teachers in a program to meet the same pre-service education requirements, so that teachers with lower credentials are not placed disproportionately in infant and toddler classrooms.
 - b. Require, and make available, professional development specifically targeted to building the skills of infant and toddler teachers.
 - c. Structure financial incentives and supports for providers and families (such as subsidy) so that providers can cover the true cost of providing high quality care for infants and toddlers using funds collected (from families and other sources) specifically for infants and toddlers, rather than using funds collected from other age groups to subsidize infant and toddler spaces. This includes equity in compensation for infant and toddler teachers.

These major issues were seriously considered by all workgroups and informed their recommendations.

Program Assessments Workgroup

The Program Assessments Workgroup conducted an extensive study of a wide array of assessment tools that are in use across the nation to measure overall child care program quality, as well as tools designed to measure specific domains/indicators of quality. The group also considered different QRIS models for evaluating program quality and thoroughly reviewed North Carolina's current QRIS system. Based on this review, the Committee recommends the following:

- I. Continue to conduct formalized external assessments (performed by an entity who/that is unaffiliated with the program being assessed) at no expense to providers as part of the basis for a program's evaluation in the QRIS.

2. Continue to use the Environment Rating Scales (ITERS, ECERS-R, SACERS, and FCCERS-R) as a measure of global quality in North Carolina's QRIS system while further study and development of alternative measures continues.
3. Promote and reward the use of self-assessments within programs by including requirements for self-assessment in the QRIS, and providing training and technical assistance to strengthen programs' self-assessment in a variety of areas of their program.
4. Incorporate other measures that show promise as valid and reliable tools into the QRIS as part of the self-assessment process and incorporate incentives in the QRIS for training and use of the tools. Collect data/study these tools to consider them for use as part of the high stakes assessment process in the future.
5. Enable and encourage programs to engage in continuous quality improvement by providing the opportunity for lower star-rated child care programs to enter into a quality improvement process with a non-binding initial external assessment, the results of which would inform an actionable quality improvement plan for the program supported by technical assistance resources.
6. Revise the current "points-based" QRIS to a hybrid model that includes both "points" and "building blocks" and enables and encourages programs to engage in continuous quality improvement.
7. Consider the inclusion of NAEYC and other comparable national accreditation programs within the revised QRIS.



Programmatic Standards Workgroup

The Programmatic Standards Workgroup was responsible for making recommendations on a very broad spectrum of issues that affect many different types of early education settings. The group discussed issues related to family engagement, ratios and group size, curriculum, physical environments, ongoing assessments, religious-sponsored programs, school age programs, family child care homes, children with special needs, community partnerships, program administration, health/safety, and teacher/child interactions. Therefore, it was extremely difficult for the group to specify individual recommendations as priority areas. The group did identify the following four areas of focus for their recommendations:

- I. Strengthen standards for health and safety requirements such as:
 - a. Require individual health plans for children with chronic health conditions.
 - b. Require standardized health and safety orientation sessions for all teaching staff.
 - c. Require training on inclusion and care of children with special needs for all permanent staff.
2. Implement rule changes in order to address the need for lower teacher/child ratios and smaller group size arrangements.
3. Give priority to the recommendations that are consistent with quality enhancements included in the NC Race to the Top – Early Learning Challenge Grant. Examples of these strategies include:
 - a. The diversity and culture of families should be reflected in all aspects of the program.
 - b. Strengthen requirements for programs in the area of Family and Community Engagement.
 - c. Ensure required curricula have appropriate assessments to guide instruction.
 - d. Program standards should reflect expectations that classroom environments and adult-child interactions will support children's progress on the goals articulated in Foundations, North Carolina's Early Learning & Development Standards
 - e. Convene focus groups to further study policy changes needed for religious-sponsored programs and family child care homes.

4. Support recommendations that represent areas of interest as expressed by the NC Child Care Commission. Priority should be given to recommendations that are already in the discussion phase at the Child Care Commission level, or have already begun the rule-making process. Examples of these recommendations include:
 - a. Strengthen emergency preparedness and response procedures and provide staff training as necessary.
 - b. Require the use of an approved curriculum for birth – five year old children in all 4 & 5 star early education programs.
 - c. Strengthen nutrition requirements and provide clarity for nutrition guidelines across age groups.

Systems-Level Evaluation Workgroup

The Evaluation Workgroup developed recommendations related to the process of revising the QRIS and recommendations for strengthening the evaluation of the QRIS. The recommendations are summarized below.

Recommendations for Revising the QRIS

1. Develop and implement a process for making final decisions about revisions to the QRIS that considers the research available to support the revised standard/criteria, the extent to which the new standards/criteria can be measured objectively, and the capacity of providers, DCDEE, NC Rated Assessment Project, Child Care Resource & Referral, and local Smart Start programs to support the new requirements.
2. “Test” the proposed revisions, to the extent possible, before formally rolling out the revisions to ensure that the revised QRIS rating structure is performing as expected. Use existing data on current programs, collect self-report data from programs to gauge their perceptions of the new requirements, and/or gather some new data from programs to test or validate the proposed revised QRIS.

Recommendations to Strengthen Evaluation of the QRIS

3. Develop a Research and Evaluation position at DCDEE to maximize the use of existing data at DCDEE, coordinate research and evaluation projects, and possibly conduct some small studies.
4. Develop an evaluation plan that prioritizes the agencies' research/evaluation questions of interest. Review and revise the plan every few years, and use the plan to guide decisions about funding particular research/evaluation projects. Consider validating the revised QRIS, studying parent awareness and use of the star ratings, and evaluating the effectiveness of quality improvement efforts as part of the evaluation plan.



Additional Recommendations in the QRIS Revision Process

In addition to the Work Group recommendations described above, the full Committee made the following recommendations:

1. DCDEE should analyze the full scope of the recommendations and prioritize changes within the context of QRIS system elements. Work with specific partners to implement determined priorities.
2. Initiate a process to collect input/feedback regarding the Advisory Committee's recommendations from additional stakeholders. Additional groups will be convened to solicit further input from key sectors such as: family child care homes, religious-affiliated programs, public school preschool programs, and school-age programs. The effort to gather feedback from religious-affiliated programs should be aligned with strategies funded through the NC Race to the Top – Early Learning Challenge Grant.
3. Design the Race to the Top Early Learning Challenge QRIS Validation Study to test the impact of recommended standards for the different levels within the QRIS structure before the revised QRIS is implemented. Validate the revised QRIS, utilizing existing data and targeted data collection from selected providers.
4. Disseminate the recommendations within DCDEE, with partners and to the broader early childhood community. The recommendations are intended for a broad audience that includes the Child Care Commission, the Early Childhood Advisory Council, advocacy groups, legislators, state and local-level agency partners, higher education, technical assistance specialists, and early education providers. Given the breadth and depth of the recommendations and the



multiple audiences that they are directed toward, the Advisory Committee recommends that the full report be viewed as something that requires a long-term implementation plan. The Advisory Committee would like for the report to be broadly disseminated and used as a roadmap for DCDEE and other stakeholders that will provide policy guidance in the decade ahead. With this goal in mind, we recommend that DCDEE:

- a. Share the report/recommendations first with the Child Care Commission. Schedule a special meeting of the Child Care Commission to consider these recommendations and support the Commission's on-going efforts to consider and implement the recommendations.
- b. Disseminate the recommendations to the broader early childhood community. For example, the Executive Summary should be sent to stakeholders via email and DCDEE newsletter, as well as posted on the DCDEE website.

Conclusion

Through the diligent and committed involvement of the QRIS Advisory Committee members, the state of North Carolina now has a blueprint for the continued evolution of the QRIS. North Carolina has been a leader in the QRIS movement and this document enhances our standing as a forward-thinking state with regard to high quality care and education for young children. This document addresses many aspects of quality that were not included by North Carolina and many states in the first iteration of their QRIS. The attention to the importance of cultural competence, inclusion, early learning standards, as well as compensation is critical for the second generation of the QRIS. While we realize that a blueprint will require a significant amount of time and resources before it becomes a full-fledged structure, it is a significant step toward creating a vision for the highest quality of care and education for all of North Carolina's children.

The North Carolina Division of Child Development and Early Education extends its sincere appreciation to all of the members of the QRIS Advisory Committee and others who provided resource support. We further extend our thanks to the many staff members of DCDEE who committed extensive hours (on top of their already full-time jobs) to the QRIS revision work. The teamwork demonstrated in this effort is what makes North Carolina strong and a leader in high quality early care and education.

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The North Carolina Quality Rating and Improvement System (QRIS)



Advisory Committee Executive Summary September, 2012

